Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |                                |                     |                  |   | SMALL ENTITY TYPE ( |                        |    | OTHER THAN<br>OR SMALL ENTITY         |                          |  |
|---|--|---|--------------|--------------------------------|---------------------|------------------|---|---------------------|------------------------|----|---------------------------------------|--------------------------|--|
| TOTAL CLAIMS  |  |   | 6            |                                |                     |                  |   | RATE                | FEE                    |    | RATE                                  | FEE                      |  |
| FOR   |  |   | NUMBER FILED |                                | NUMBER EXTRA        |                  |   | BASIC FEE           | 375.00                 | OR | BASIC FEE                             | 750.00                   |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 12 minus 20= |                                | * 3                 |                  |   | X\$ 9=              |                        | OR | X\$18=                                |                          |  |
| INDEPENDENT CLAIMS  |  |   | / m          | inus 3 =                       | * Ø                 |                  |   | X42=                |                        | OR | X84=                                  |                          |  |
| MU  | LTIPLE DEPEN   | IDENT CLAIM P                             | RESENT       |                                |                     |                  |   | .440                |                        |    |                                       |                          |  |
| * If the difference in column 1 is less than zero, enter "0" in                       |  |   |              |                                |                     | column 2         |   | +140=               |                        | OR | +280=                                 | 280                      |  |
| CLAIMS AS AMENDED - PART II   |  |   |              |                                |                     |                  |   | TOTAL               |                        | OR | TOTAL                                 | 1230                     |  |
|   |  | (Column 1)                                | MAICIADEL    | Colur                          |                     | (Column 3)       |   | SMALL               | ENTITY                 | OR | OTHER<br>SMALL I                      |                          |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                  | ADDI-<br>TIONAL<br>FEE   |  |
|   | Total  | *   | Minus_       | **                             |                     | =                |   | X\$ 9=              |                        | OR | X\$18=                                |                          |  |
|   | Independent  | *   | Minus        | ***                            |                     |                  |   | X42=                |                        | OR | X84=                                  | Y.                       |  |
| Ļ   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE   | PENDENT                        | CLAIM               |                  |   | +140=               |                        | OR | +280=                                 |                          |  |
|   |  |   |              |                                |                     |                  |   | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE                   |                          |  |
|   | Tanasanna -  | (Column 1)                                |              | (Colur                         |                     | (Column 3)       |   |                     |                        |    |                                       |                          |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                  | ADDI-<br>TIONAL<br>FEE   |  |
|   | Total  | *   | Minus        | **                             |                     | =                |   | X\$ 9=              |                        | OR | X\$18=                                |                          |  |
|   | Independent  | *   | Minus        | ***                            |                     |                  |   | X42=                |                        | OR | X84=                                  |                          |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |              |                                |                     |                  |   | +140=               | :                      | OR | +280=                                 |                          |  |
|   |  |   |              |                                |                     |                  | 1 | TOTAL<br>ADDIT. FEE | -                      | OR | TOTAL<br>ADDIT, FEE                   |                          |  |
| _   | (Column 1) (Column 2) (Column 3)   |   |              |                                |                     |                  |   |                     |                        |    | · · · · · · · · · · · · · · · · · · · |                          |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIĞH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                  | . ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                             |                     | =                |   | X\$ 9=              |                        | OR | X\$18=                                |                          |  |
|   | Independent  | *   | Minus        | ***                            |                     | =                | Ì | X42=                | <u></u>                |    | X84=                                  |                          |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                                |                     |                  | 1 |                     |                        | OR |                                       |                          |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |              |                                |                     |                  |   |                     |                        | OR | +280=                                 |                          |  |
| **  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                |                     |                  |   |                     |                        |    |                                       |                          |  |